

## State of Idaho

Pete T. Cenarrusa Secretary of State

To Be Filed	Ву:	7	
L-2	LOBBYISTS (Sec. 67-6619)	2005 JAN 18	PM 2: 24
		SLUNLTARY : STATE OF	IDAHO

							SLUKLI.		wi.		
		(Type or p	print clearly)				STAT	E OF IDAHO	)		
Lobbyis	t's name and r	See instructions permanent busine	at bottom of page			Date pr	epared		Period o	covered	
Tyler Bleszinski				ŀ	•			<sub> </sub>	year endin	g	
Perry Communications				January 12, 20		2005	1 <b>–</b>		0		
925	L Street, S	uite 600							(Mo.)	(Day)	(Yr.)
Sacr	amento, C	alifornia 958	314		Ì				12	31	04
Item 1			ble expenditures made								er.
Category of Expenditure Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity		Total Expenditure	Item 3, at bottom of		ats contributed by each employer (Identify employers, under f page.)						
	o Not Have to b			Employer	No. 1	F	Employer No. 2	Employer N	o. 3	Employer	No. 4
	inment nd Refreshm	ent	s0.00	\$		s_		s		\$	
Living	Accommoda	tions	0.00								
Advert	ising		0.00								
Travel			0.00								
Telepho	one		0.00								
	Expenses		0.00			-					
	Expenses or S	Services	0.00								
		Total	s 0.00	s	0.00	<b>\$</b> _		\$		s	
Item	The totals	of each expend	liture of more than fifty	dollars (\$50) f	for a legi	islator	or other holder o	of public office.		·	
2	Date	or each expend	Place	donars (\$30) i	Amou			of Legislators & P	ublic Off	icials in Grou	p
	NA										
	Continued on	attached page(s)									
			RUCTIONS		7	Item 3	Er	nployer(s) Name(s	s) and Ad	ldress(es)	
Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code			No	Pharmaceutical Research & Manufacturers of America (PhRMA)  No. 1 1100 15th Street NW, Ninth Floor  Washington, DC 20005							
Filing deadline: Annual report is due on January 31st.			No	o. 2							
то	BE FILED V		_								
Pete T. Cenarrusa Secretary of State PO Box 83720			No	o. 3			-				
Boise, ID 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282				No	o. 4						

Item 4			de by the lobbyist or by the lobbyist's employer in the nature of contributions of money or other tangible or intangible to any Legislator, or for or on behalf of any legislator.						
	Date	Amount		Name of Legislator Receiving or Benefited					
	N/A								
Item			tion, the number of the Senate r legislative activity in which		LEGISLATIVE SUI	BJECT	IDENTIFICATION		
5		vas supporting or o		Code	Subject	Code	Subject		
Subject	Code Bill, R	esolution or Other	Appropriation Bill Number	01	Agriculture, horticulture, farming, and livestock	17	Health service, medicine, drugs		
(from	table) Legisla	tive Ident. Number	and Section Number	02	Amusements, games, athletics		and controlled substances, health insurance, hospitals		
N/	Α				and sports	18	Higher education		
				03	Banking, finance, credit and investments	19	Housing, construction, codes		
				04	Children, minors, youth,	20	Insurance (excluding health insurance)		
					senior citizens	21	Labor, salaries and wages,		
				05	Church and religion		collective bargaining		
				06 07	Consumer affairs	22	Law enforcement, courts,		
				0,	Ecology, environment, pollution, conservation, zoning, land and	23	judges, crimes, prisons License, permits		
					water use	24	Liquor		
				08	Education	25	Manufacturing, distribution and		
				09	Elections, campaigns, voting,	26	services		
				10	political parties  Equal rights, civil rights,	26	Natural resources, forest and forest products, fisheries, mining		
				''	minority affairs		and mining products		
	1			11	Government, financing,	27	Public lands, parks, recreation		
					taxation, revenue, budget,	28	Social insurance, unemployment		
				12	appropriations, bids, fees, funds Government, county		insurance, public assistance, workmen's compensation		
	.,			13	Government, federal	29	Transportation, highways,		
CERTIE	FICATION: I he	reby certify that the	above is a true, complete and	14	Government, municipal		streets and roads		
			n 67-6624 Idaho Code.	15	Government, special districts Government, state	30	Utilities, communications, televisions, radio, newspaper, power, CATV, gas		
Lobbyis	it signature	ne E	Riori 1/13/1	55		31	Other (please specify)		
Employ	er No. I signatu	re	Date						
Employ	er No. 2 signatu	re	Date						
Employ	er No. 3 signatu	re	Date						
Employ	er No. 4 signatu	re	Date						
. ,	•								